



Attorney Docket No.: MEMS-0253-US

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): **BROWN**

Application No.: **09/507,466**

Filed: **22 Feb 2000**

Title: **OPTICAL DEVICE, SYSTEM AND METHOD**

Conf. No.:

Art Unit: **2872**

Examiner:
T. Nguyen

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

REPLY AND/OR AMENDMENT UNDER 37 C.F.R. §§ 1.111

Sir:

In response to the Office Action of 15 September 2004, we have changed the "previously presented" label on claim 9 to "currently amended" and resubmit the copy of the response filed 29 June 2004, which was in response to the 16 March 2004 Office Action.

Please amend the above-identified application as follows:

Amendments to the Specification begin on page 2 of this paper.

Amendments to the Claims are reflected in the listing of claims which begins on page 3 of this paper.

Remarks/Arguments begin on page 8 of this paper.

09/01/2005 YDWINNS 00000001 593136 05597466

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200.00 DA

Reply to Office Action dated 15 September 2004

Examiner is invited to contact the undersigned attorney, at the telephone number listed below.

To the extent necessary, a petition for an extension of time under 37 C.F.R. 1.136 is hereby made. Please charge any shortage in fees due in connection with the filing of this, concurrent and future replies, including extension of time fees, to Deposit Account 50-3136 and please credit any excess fees to such deposit account.

Respectfully submitted,
Keady, Olds, Maier & Richardson PLLC



John P. Keady
Registration No. 56,389

P.O. Box 20245
Alexandria, VA 22320-1245
(888) 510-0695

Date:

Attachment(s):

PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docket Number

09507466

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.16(a))		
TOTAL CLAIMS (37 CFR 1.16(c))	minus 20 =	*
INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 3 =	*
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))		

RATE	FEE
	\$ _____
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL	

RATE	FEE
	\$ _____
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

AMENDMENT A	(Column 1)	(Column 2)	(Column 3)	(Column 4)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	2/11/05			
	Total (37 CFR 1.16(c))	19	Minus	20 = —
Independent (37 CFR 1.16(b))	4	Minus	3 = 1	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL	
ADD'L FEE	

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ 200 =	200
+ \$ _____ =	
TOTAL	
ADD'L FEE	200

Pd.

(Column 1)

(Column 2)

(Column 3)

RATE

ADDITIONAL
FEE

RATE

ADDITIONAL
FEE

AMENDMENT B	(Column 1)	(Column 2)	(Column 3)	(Column 4)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))		Minus	=
Independent (37 CFR 1.16(b))		Minus	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL	
ADD'L FEE	

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL	
ADD'L FEE	

(Column 1)

(Column 2)

(Column 3)

RATE

ADDITIONAL
FEE

RATE

ADDITIONAL
FEE

AMENDMENT C	(Column 1)	(Column 2)	(Column 3)	(Column 4)
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total (37 CFR 1.16(c))		Minus	=
Independent (37 CFR 1.16(b))		Minus	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL	
ADD'L FEE	

RATE	ADDITIONAL FEE
X \$ _____ =	
X \$ _____ =	
+ \$ _____ =	
TOTAL	
ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.